

**DECLARATION AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 21242

First Named Inventor Boyd et al.

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

OPHTHALMIC COMPOSITIONS FOR TREATING OCULAR HYPERTENSION

(Title of the Invention)

the specification of which

☒ bears the Attorney Docket Number and Title of the Invention noted above

OR

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International

Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f) or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/458,103	03/27/2003	21242PV

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

☐ Customer Number
 OR
☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Sylvia A. Ayler	36,436	Valerie J. Camara	35,090

Direct all correspondence to: ☒ Customer Number

Name	Sylvia A. Ayler				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-4909	Fax	(732)594-4720

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Edward A.	Boyd

Inventor's Signature				Date			
Residence:	Berkshire	State	GBX	Country	United Kingdom	Citizenship	GB
City							
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		

☒ Additional inventors are being named on the 2 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Michael H.				Fisher				
Inventor's Signature	Michael H. Fisher				Date	2/19/2004		
Residence: City	Ringoes	NJ	State	NJ	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000							
City	Rahway	State	NJ	ZIP	07065-0907			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Maria L.				Garcia				
Inventor's Signature	Maria L. Garcia				Date	2/19/2004		
Residence: City	Edison	NJ	State	NJ	Country	US	Citizenship	ES
Post Office Address	Merck & Co., Inc., P.O. Box 2000							
City	Rahway	State	NJ	ZIP	07065-0907			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Gregory J.				Kaczorowski				
Inventor's Signature	Gregory J. Kaczorowski				Date	2/19/04		
Residence: City	Edison	NJ	State	NJ	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000							
City	Rahway	State	NJ	ZIP	07065-0907			
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])				Family Name or Surname				
Peter T.				Meinke				
Inventor's Signature	Peter T. Meinke				Date	19-Feb-04		
Residence: City	Plainfield	NJ	State	NJ	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000							
City	Rahway	State	NJ	ZIP	07065-0907			

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
William H.				Parsons			
Inventor's Signature	<i>William H. Parsons</i>			Date	March 26, 2009		
Residence: City	Belle Mead	NJ	State	NJ	Country	US	Citizenship
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Stephen				Price			
Inventor's Signature				Date			
Residence: City	Hertford	GBX	State		Country	United Kingdom	Citizenship
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
John				Stibbard			
Inventor's Signature				Date			
Residence: City	Oxon	GBX	State		Country	United Kingdom	Citizenship
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City		State		Country		Citizenship	
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	21242
	First Named Inventor	Boyd et al.
	COMPLETE IF KNOWN	
	Application Number	
	Filing Date	
	Group Art Unit	
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

OPHTHALMIC COMPOSITIONS FOR TREATING OCULAR HYPERTENSION

(Title of the Invention)

the specification of which

☒ bears the Attorney Docket Number and Title of the Invention noted above

OR

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f) or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/458,103	03/27/2003	21242PV

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

☐ Customer Number
 OR
☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Sylvia A. Ayler	36,436	Valerie J. Camara	35,090

Direct all correspondence to: ☒ Customer Number **000210**

Name	Sylvia A. Ayler				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-4909	Fax	(732)594-4720

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Family Name or Surname
Edward Andrew	Boyd

Inventor's Signature				Date		
Residence: City	Berkshire	State		Country	United Kingdom	Citizenship GB
Post Office Address	Merck & Co., Inc., P.O. Box 2000					
City	Rahway	State	NJ	ZIP	07065-0907	

☒ Additional inventors are being named on the 2 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.

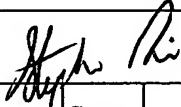
DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Michael H.				Fisher			
Inventor's Signature						Date	
Residence: City	Ringoes	State	NJ	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Maria L.				Garcia			
Inventor's Signature						Date	
Residence: City	Edison	State	NJ	Country	US	Citizenship	ES
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Gregory J.				Kaczorowski			
Inventor's Signature						Date	
Residence: City	Edison	State	NJ	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Peter T.				Meinke			
Inventor's Signature						Date	
Residence: City	Plainfield	State	NJ	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		

DECLARATION AND POWER OF ATTORNEY

ADDITIONAL INVENTOR(S) Supplemental Sheet

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
William H.				Parsons			
Inventor's Signature						Date	
Residence: City	Belle Mead	State	NJ	Country	US	Citizenship	US
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Stephen				Price			
Inventor's Signature						Date	1 st April 2004
Residence: City	Hertford	State		Country	United Kingdom	Citizenship	GB
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
John				Stibbard			
Inventor's Signature						Date	
Residence: City	Oxon	State		Country	United Kingdom	Citizenship	GB
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address	Merck & Co., Inc., P.O. Box 2000						
City	Rahway	State	NJ	ZIP	07065-0907		

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	21242	
	First Named Inventor	Boyd et al.	
	COMPLETE IF KNOWN		
	Application Number		
	Filing Date		
	Group Art Unit		
		Examiner Name	

☒ Declaration Submitted with Initial Filing **OR** ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

OPHTHALMIC COMPOSITIONS FOR TREATING OCULAR HYPERTENSION

(Title of the Invention)

the specification of which

☒ bears the Attorney Docket Number and Title of the Invention noted above

OR

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose to the Patent and Trademark Office all information known to me to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f) or 365(b) of any foreign application(s) for patent or inventor's certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed?	
				YES	NO
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Attorney Docket Number
60/458,103	03/27/2003	21242PV

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information known to me to be material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Application Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint, respectively and individually, as my attorney(s) or agent(s) with full power of substitution and revocation, the following registered practitioner(s) to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith:

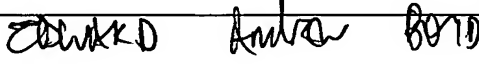
☐ Customer Number
 OR
☒ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number
Sylvia A. Ayler	36,436	Valerie J. Camara	35,090

Direct all correspondence to: ☒ Customer Number

Name	Sylvia A. Ayler				
Address	Merck & Co., Inc. - Patent Department				
Address	P.O. Box 2000, RY60-30				
City	Rahway	State	NJ	ZIP	07065-0907
Country	USA	Telephone	(732)594-4909	Fax	(732)594-4720

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])			Family Name or Surname		
Edward Andrew			Boyd		
Inventor's Signature				Date	13 th April 2004
Residence: City	Berkshire	State		Country	United Kingdom
				Citizenship	GB
Post Office Address	Merck & Co., Inc., P.O. Box 2000				
City	Rahway	State	NJ	ZIP	07065-0907

☒ Additional inventors are being named on the 2 supplemental Additional Inventors(s) sheet(s) PTO/SB/02A attached hereto.

DECLARATION AND POWER OF ATTORNEY	ADDITIONAL INVENTOR(S) Supplemental Sheet
--	---

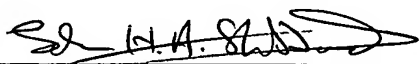
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Michael H.				Fisher			
Inventor's Signature						Date	
Residence: City	Ringoes	State	NJ	Country	US	Citizenship	US
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City	Rahway	State	NJ	ZIP	07065-0907		

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Maria L.				Garcia			
Inventor's Signature						Date	
Residence: City	Edison	State	NJ	Country	US	Citizenship	ES
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City	Rahway	State	NJ	ZIP	07065-0907		

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Gregory J.				Kaczorowski			
Inventor's Signature						Date	
Residence: City	Edison	State	NJ	Country	US	Citizenship	US
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City	Rahway	State	NJ	ZIP	07065-0907		

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Peter T.				Meinke			
Inventor's Signature						Date	
Residence: City	Plainfield	State	NJ	Country	US	Citizenship	US
Post Office Address		Merck & Co., Inc., P.O. Box 2000					
City	Rahway	State	NJ	ZIP	07065-0907		

DECLARATION AND POWER OF ATTORNEY**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
William H.				Parsons					
Inventor's Signature						Date			
Residence: City		Belle Mead		State NJ		Country US		Citizenship US	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Stephen				Price					
Inventor's Signature						Date			
Residence: City		Hertford		State		Country United Kingdom		Citizenship GB	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
John				Stibbard					
Inventor's Signature						Date		13 th April 2004	
Residence: City		Oxon		State		Country United Kingdom		Citizenship GB	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])				Family Name or Surname					
Inventor's Signature						Date			
Residence: City				State		Country		Citizenship	
Post Office Address		Merck & Co., Inc., P.O. Box 2000							
City		Rahway		State NJ		ZIP		07065-0907	